

Serial No.

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (English Language Declaration)

File No. 7170-01627

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

believe I am the original, first and sole inventor (if only one name nventor (if plural names are listed below) of the subject matte sought on the invention entitled ARM REST MASSAGE Is specification of which (check one):	r which is claim	ned and for which a patent is
[x] is attached hereto [] was filed on as Serial No and w	vas amended o	n (if applicable).
I hereby state that I have reviewed and understand the contents the claims, as amended by any amendment referred to above.	of the above ide	entified specification, including
I acknowledge the duty to disclose to the Office all information k defined in Title 37, Code of Federal Regulations §1.56.	known to me to	be material to patentability, as
I hereby claim foreign priority benefits under Title 35, United application(s) for patent or inventor's certificate listed below application for patent or inventor's certificate having a filing date is claimed:	and have also	identified below any foreign
Prior Foreign Application(s)	Priority Clai	imed
Number Country Day/Month/Year	Yes	No
	[] [] []	[] [] []
I hereby claim the benefit under Title 35, United States Code 12 international application(s) designating the United States of An matter of each of the claims of this application is not disclose manner provided by the first paragraph of Title 35, United States to the Office all information known to me to be material to pater Regulations 1.56, which occurred between the filing date of international filing date of this application:	nerica listed be d in the prior U s Code 112, I ac ntability as defin	low and, insofar as the subject nited States application in the knowledge the duty to disclose led in Title 37, Code of Federa

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Filing Date

Status

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(c) and 1.27(b)) - INDEPENDENT INVENTOR

I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees (for a Small Entity Status) under §41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled <u>ARM REST MASSAGE FEATURE FOR WHIRLPOOL TUBS</u> described in the specification filed herewith.

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith along with any and all foreign applications filed and foreign patents issued therefrom.

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GARY P. BELFORD Full Name of Sole or First Inventor	<u>United States</u> Citizenship		
Inventor's Signature	Date		
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